ALL INFORMATION IS TOTALLY CONFIDENTIAL OP PE				
REQUEST FOR PREGNANCY TEST Please Print				
DATE/	Please	e Print		
NAME		AGE	_ DOB_	1 1
Address			PHONE	<u> </u>
CITY STATE ZIP				
RACE: PLEASE MARK ALL THAT APPLY How do you feel about becoming pregnant?				
Afro – American Black American Indian/Alaskan		(Check the best answer). 1 I wanted to be pregnant sooner		
American Indian/Aiaskan Asian		2 I wanted to be pregnant later		
Caucasian	3 I wanted	3 I wanted to be pregnant now		
Pacific Islander	4 I didn't want to be pr			pregnant then or at any time
Other		in the fut	ure	
ETHNICITY: HispanicYes	No	Are you a smoker	? Yes	No
1. Any symptoms of pregnancy?	YesNo If yo	es, list any symptoms:_		
2. First day of your last period	No			
3. Was it a normal period?Yes4. When was your last act of intercourse	NO			
5. Check the method of birth control u		ondoms □Implanon □	⊒IUD □P	atch □Ring □None □Other
6. If the result of the pregnancy test is no	egative, are you interest	ed in a method of birth	control?	YesNo
7. If you are pregnant, do you want a ref	erral for: Prenate	al Care Aborti	on	Adoption Unsure
8. Who do you see when you get sick?9. How many pregnancies have you ha	.d9 10 How n	aany hintha?	1 Цот г	many misaanniagas?
12. How many abortions? 13.	iu: iv. now ii Household annual inc	nany pirtus: i	.1. поw I 14. N	nany miscarriages: Jumber in household:
I request that this clinic provide me with a				
as possible (within 15 days). If the test is positive, I will give a copy of this form to my health care provider. I hereby relieve this				
1'' 1'' 1 0 1 11 1			. 1 1	
clinic and its employees from any and all l	iability connected with	this pregnancy test, pa	rticularly	with regards to error.
Client Signature Date	Staff		Date	
Client Signature Date Test Done	Staff Reason Tes	st Not Done	Date	Test Results
Client Signature Date Test Done	Staff Reason Test Date of LMP too r	st Not Done ecent	Date	Test Results ive □ Positive
Client Signature Date Test Done	Staff Reason Tes	st Not Done ecent	Date	Test Results
Client Signature Date Test Done □ Yes □ No	Staff Reason Termore Date of LMP too rolling Client left Ot	ecent her	Date	Test Results ive Dositive EDC Wks. gest.
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